

W. THAD ADAMS, III
 J. SCOTT EVANS
 STEPHEN S. ASHLEY, JR.
 MATTHEW J. LADENHELM
 JONATHAN M. HINES
 BRANDON C. TREGO
 KATHRYN A. GROMICKOVY
 SETH L. HUDSON

ADAMS EVANS P.A.
 INTELLECTUAL PROPERTY ATTORNEYS

2180 Two Wachovia Center
 301 South Tryon Street
 Charlotte, North Carolina 28282-1991
 Telephone: (704) 375-9249
 Facsimile: (704) 375-0729

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FACSIMILE TRANSMISSION

TO: MAIL STOP MISSING PARTS FROM: Jonathan M. Hines
 Art Unit - Not Yet Assigned Reg. No. 44,764

DATE: February 22, 2006 FAX NO: (571) 273-8300

RE: Our File No. 3427/1US; U.S. Patent Application Serial No. 10/539,712 ✓

CONFIRMATION COPY YES NO ✓
 TO FOLLOW:

NUMBER OF PAGES Cover + 5

MESSAGE: Please see the attached Response to Notice to File Missing Parts of NonProvisional Application for U.S. Patent Application Serial No. 10/539,712 filed in reply to the Notice of Missing Parts dated January 13, 2006.

Also, please confirm receipt of this facsimile. Thank you.

If any problems in transmission occur, please contact Delia Dominguez Legal Assistant

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PTO/SB/21 (08-04)
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**TRANSMITTAL
FORM**

(To be used for all correspondence after initial filing)

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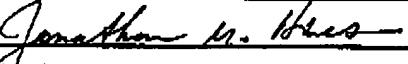
7

| | |
|--|---------------------|
| Application Number | 10/539,712 |
| Filing Date | 06/17/2005 |
| First Named Inventor | David Charles Aslin |
| Art Unit | Not Yet Assigned |
| Examiner Name | Not Yet Assigned |
| Total Number of Pages in This Submission | 7 |
| Attorney Docket Number | 3427/1US |

ENCLOSURES (Check all that apply)

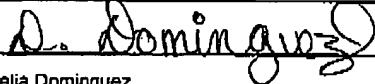
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|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Declaration; Facsimile Cover Sheet |
| Remarks If there are any fees due in connection with the above-referenced matter, please charge Deposit Account No. 01-0265. | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|--------------|---|----------|--------|
| Firm Name | ADAMS EVANS P.A. | | |
| Signature |  | | |
| Printed name | Jonathan M. Hines | | |
| Date | 02/22/2006 | Reg. No. | 44,764 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

| | | | |
|-----------------------|---|------|------------|
| Signature |  | | |
| Typed or printed name | Delia Dominguez | Date | 02/22/2006 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (01-06)
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2006 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

\$130.00

Complete if Known

| | |
|----------------------|---------------------|
| Application Number | 10/539,712 |
| Filing Date | 06/17/2005 |
| First Named Inventor | David Charles Aslin |
| Examiner Name | Not Yet Assigned |
| Art Unit | Not Yet Assigned |
| Attorney Docket No. | 3427/1US |

METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): _____ Deposit Account Deposit Account Number 01-0265 Deposit Account Name: ADAMS EVANS P.A.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEES CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fee Paid (\$) |
|------------------|--------------|----------|--------------|----------|------------------|----------|---------------|
| | Small Entity | Fee (\$) | Small Entity | Fee (\$) | Small Entity | Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

| Small Entity | Fee (\$) |
|--------------|----------|
| | 50 |
| | 25 |
| | 200 |
| | 100 |
| | 360 |
| | 180 |

Each independent claim over 3 (including Reissues)

Multiple dependent claims

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|----------|---------------|---------------------------|----------|---------------|
| - 20 or HP = | x | = | | | | |

HP = highest number of total claims paid for, if greater than 20.

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | | |
|---------------|--------------|----------|---------------|--|--|
| - 3 or HP = | x | = | | | |

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 = | / 50 = | (round up to a whole number) x | = | |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Surcharge for Late Declaration/Oath \$130.00

SUBMITTED BY

| | | | | | |
|-------------------|--------------------------|--------------------------------------|--------|-----------|--------------|
| Signature | <u>Jonathan M. Hines</u> | Registration No. (Attorney/Agent) | 44,764 | Telephone | 704-375-9249 |
| Name (Print/Type) | Jonathan M. Hines | | | Date | 02/22/2008 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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